BCPharmaCare Newsletter *September 9, 2008 Edition 08-009*

QuickLinks

Expanded Coverage of Biologics for Crohn's Disease 1
Correct Quantities for Biologics 2
Revision to LCA Categories—Tamsulosin TAB/CAP 0.4MG 2

EXPANDED COVERAGE OF BIOLOGICS FOR CROHN'S DISEASE

Effective September 9, 2008, Pharmaceutical Services Division is:

- modifying the Special Authority criteria for biologics for Crohn's disease to include moderate Crohn's disease
- introducing a quick, one-page patient assessment form based on the Harvey-Bradshaw Index
- expanding coverage to include an additional biologic, adalimumab (Humira®), under the modified criteria
- offering a single request form for initial/renewal coverage to be completed by a gastroenterologist.

Criteria Change:

The current criteria provide for treatment of severe, active Crohn's disease and fistulizing Crohn's disease. The modified criteria provide for treatment of moderate to severe, active Crohn's disease and fistulizing Crohn's disease as defined on the Special Authority forms.

Duration of coverage:

Initial coverage adalimumab or infliximab during induction period

Renewal coverage for maintenance treatment with either drug, if effective—up to one year.

Forms changes:

To reflect the changes, we have updated the Special Authority forms as follows:

- HLTH 5368—This single form can now be used to request initial / renewal coverage of adalimumab / infliximab for either moderate to severe, active Crohn's or fistulizing Crohn's.
- HLTH 5374—This worksheet provides the scoring for the patient's Harvey Bradshaw Index (the resulting score is entered on the request form HLTH 5368 above).
- HLTH 5347 & 5348—These forms are no longer needed.

Visit the Special Authority section of our website for the forms and full criteria for coverage: www.health.gov.bc.ca/pharme/sa/criteria/restricted/restrictedtable.html.

The use of PharmaNet is not intended as a substitute for professional judgment. Information on PharmaNet is not exhaustive and cannot be relied upon as complete. The absence of a warning about a drug or drug combination is not an indication that the drug or drug combination is safe, appropriate or effective in any given patient. Health care professionals should confirm information obtained from PharmaNet, and ensure no additional relevant information exists, before making patient care decisions.

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CORRECT QUANTITIES FOR BIOLOGICS

Information on the correct units of measure for claims can also be found on the PharmaCare website at www.health.gov.bc.ca/pharme/pdf/CorrectQuant.pdf.

DIN	Drug Name and Strength	Claim Quantity
2258595	Adalimumab 40 mg	Per syringe (Note that one tray includes 2 syringes)
2244016	Infliximab 100 mg	Per vial
2242903	Etanercept 25 mg	Per kit (Note that one kit contains 4 syringes)
2274728	Etanercept 50 mg	Per syringe

REVISION TO LCA CATEGORIES—TAMSULOSIN TAB/CAP 0.4MG

An error occurred in PharmaCare Newsletter (08-008 published August 15, 2008) in the announcement of a new LCA category for **Tamsulosin TAB/CAP 0.4MG** which will become effective on PharmaNet effective **September 19, 2008**. The table below indicates the correct LCA status for the products in this category.

NEW CATEGORY (CHEMICAL NAME)	DIN	BRAND NAME	LCA STATUS	PRICE
TAMSULOSIN TAB/CAP 0.4MG	2281392	NOVO-TAMSULOSIN	F	
	2294265	RATIO-TAMSULOSIN	F	
	2295121	SANDOZ TAMSULOSIN	F	
	2294885	RAN-TAMSULOSIN	F	
	2270102	FLOMAX CR	F	
	Price for partial benefits			0.6227

F – Fully covered